

# APPRENTICESHIP AND TRAINING DIVISION TRAINING AGENT REGISTRATION AGREEMENT

#### Effective July 1, 2022

(To be completed by employer and submitted to committee)

| Committee Name  |  |  |  | MA #  |
|---|--|--|--|---|
| Occupation(s)   |  |  |  | <u> </u>  |
| Address   |  |  |  |   |
| City  | State  | Zip Code   |  | Phone   |
| Employer Name   |  |  |  |   |
| Address   |  |  |  |   |
| City  | State  | Zip Code   | Phone  |   |
| Contact Person  | Email  |  | Youth Ce   | ertificate# (Youth TA Only)   |
| only apply for travel b. They are not registhe business may on c. They will maintain d. They are registere e. They are registere f. They abide by all g. They abide by all h. They have and wi proper supervisi | ce of business is located ing training agent status; see stered in another Orego by apply for traveling training in continuous coverage of with the Oregon Consed with the Oregon Corporegon wage and hour localld labor laws (if emploitle continue to have a surface of a copy of the standard | Traveling Training Agent Re<br>on committee as a primagent status; see Traveling<br>of workers compensation<br>struction Contractors E<br>poration Division (if a coaws, including the pre-<br>pying youth apprentices<br>fficient number of jour<br>quired ratio of apprent | rgistration Agreement for<br>the party training agent for<br>training Agent Registration<br>in insurance;<br>training (if a contractor<br>proporation);<br>vailing wage rate on<br>(s);<br>ney workers in the offices (or trainees) to | for the same occupation (if so, tion Agreement form);  r);  covered work;  occupation to provide o journey workers; and |
| Signature   | ming Agenti  | Title  |  | Date  |
| Printed Name  |  |  |  |   |
| Signature of Committee C  | hair, Secretary, or Autho  | orized Representative:   |  | _   |
| Signature   |  |  | Approval Date  |   |
| Printed Name  |  | Effective Da   | te   |   |

## **Training Agent Application**

(Submit to apprenticeship@chemeketa.edu)

# Mid-Valley Sheet Metal JATC MA # 1060 Trade: Sheet Metal Workers



| Company Name   | Phone            |                   |  |
|--|------------------|-------------------|--|
| Primary Contact  | Email            |                   |  |
| Mailing Address  |                  |                   |  |
| Physical Address (if different)  |                  |                   |  |
|  |                  |                   |  |
| City   | State Zip        |                   |  |
| Date Firm Established Month / Year   | CCB #            |                   |  |
|  |                  |                   |  |
| Business Owner's Name  | Phone            |                   |  |
| Email  |                  |                   |  |
| Workers' Comp Insurance Carrier  | # Journey-worker | # Journey-workers |  |
| Description of Work Performed with Sheet Metal Products:  Design Install Maintain Fabricate Repair  Other, please describe   |                  |                   |  |
| The official whose signature follows hereby applies for approval on behalf of their company as a training agent. If approved, the firm agrees to train Sheet Metal workers according to the provisions of applicable standards and agreements. |                  |                   |  |
| Signature of Company Official  | Title            |                   |  |
| Printed Name   | <br>Date         | Date              |  |
| The Mid-Valley Sheet Metal JATC approves the employer as a training agent under the Standards of this committee in the Sheet Metal trade.  |                  |                   |  |
| Signature of JATC Official   | Title            |                   |  |
| Printed Name   | Date             | Date              |  |
| Approval Date:   | Effective Date:  |                   |  |





Mid-Valley Sheet Metal JATC MA#1060 Chemeketa Community College, Administrator & Fiscal Agent Building 33, Room 101, 4000 Lancaster Drive NE PO Box 14007, Salem, OR 97309-7070

| Sneet wetar Training Agent Agreeme  | ent & ree Schedule                           |
|---|--|
| One-time Training Agent registration fee  | \$ 250                                       |
| Monthly fee per apprentice (pay on invoice)   | \$ 60  |
| This agreement is made by and between Chemeke and fiscal agent for Mid-Valley Sheet Metal JATC M          |  |
| Print Training Agent Company Name   |  |
| By my signature below, I understand and agree to pay administration fee for each apprentice in my employ. | Chemeketa Community College a Training Agent |
| Signature of Company Official   | Title  |
| Printed Name  | Date   |
|   |  |
| Address   |  |

Approved by Committee Administrator

Date

Phone

**Email** 





## **Sheet Metal Training Agent Application - Site Visit**

| Company Name   |  |  |
|--|--|--|
| Applicant Training Agent must provide photo evidence of the following:  Sheet metal break  Sheet metal sheer  Pittsburg or Snap Lock Machine  OSHA-approved ladder  Layout table  Sheet metal turning tools  Spot welder  Set of sheet metal rolls |  |  |
| may be viewed by a member of the committee<br>the applicant is qualified, has the minimum facil<br>employer to serve as an approved Training Age   | ent. In most cases, photos submitted with the ned that the traveling Training Agent has complied apprenticeship committee. Employers may g photos. |  |
| Signature  |  |  |
| Date of site visit (if applicable)   |  |  |
|  |  |  |
| Date Photos Reviewed:  | Date Approved:   |  |





Chemeketa Community College Apprenticeship Department Building 33, Room 101 4000 Lancaster Drive NE PO Box 14007 Salem, OR 97309-7070

### **Training Agent Acknowledgement of Receipt**

Please complete and return to Committee

This handbook contains policies and regulations which apply to me, and by which I agree to be bound. I further agree to be bound by any amendments, which may be legally adopted by the Committee and communicated to me.

I acknowledge receipt of a copy of these:

1) Mid-Valley Sheet Metal Apprenticeshin Standards

| ', | wid validy officer wetar Appromiseship otandards                             |
|----|--|
| 2) | Mid-Valley Sheet Metal JATC Apprenticeship Committee Policies and Procedures |

| Print Name | Date |
|------------|------|
| Signature  | Date |





| Mid-Valley Sheet Metal MA #1060 Wage Scale |                       |                            |                                |  |
|--|-----------------------|----------------------------|--------------------------------|--|
| Period                                     | Required OJT<br>Hours | % of Journey-level<br>Rate | Journey Level Wages<br>\$33.29 |  |
| 1  | 0-900                 | 60%                        | \$19.97                        |  |
| 2  | 901-1,800             | 65%                        | \$21.64                        |  |
| 3  | 1,801-2,700           | 70%                        | \$23.30                        |  |
| 4  | 2,701-3,600           | 75%                        | \$24.97                        |  |
| 5  | 3,601-4,500           | 80%                        | \$26.63                        |  |
| 6  | 4,501-5,400           | 85%                        | \$28.30                        |  |
| 7  | 5,401-6,300           | 90%                        | \$29.96                        |  |
| 8  | 6,301-7,200           | 95%                        | \$31.63                        |  |

Effective February 1, 2024